

Your Top-Line

Heritage Hills Nursing & Rehabilitation Center
80 Douglas Pike, Smithfield, RI 02917

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Survey Rating



Currently ranked **1st out of 84 facilities** in Rhode Island on weighted 3-cycle survey score.

For more on your survey score, see Page 2.

Staffing Rating



To gain a star in Staffing, increase your actual Total hours PPD by 0.169 (10.1 minutes) from 3.707 to 3.876.

For more on your staffing breakdown, see Page 3.

Quality Measure Rating



The greatest opportunity to improve your QM rating is on **SS ED Visits**, where you are currently earning 20 out of 100 points.

See your performance on all Quality Measures on Page 4.

Overall Rating



Your Overall Rating Calculation

+ 5 Stars (From your **Survey Rating** being 5 Stars)

+ 0 Stars (From your **Staffing Rating** being 3 Stars)

+ 0 Stars (From your **Quality Rating** being 3 Stars)

5 Stars is your Overall Rating

AHCA/NCAL Quality Initiative




See which three Quality Initiative targets your facility has met on Page 5.



AHCA/NCAL Quality Awards

Your facility was a 2015 Bronze recipient. For information on continuing the journey click [here](#)

Your Survey Score Breakdown

	Score Breakdown				Deficiencies (#)		
	Initial Score	Revisits		Total Score	Standard Health	Complaint	Total
		#	Score				
Cycle 1 on 02/20/17	0	0	0	0	0	0	0
Cycle 2 on 03/24/16	0	0	0	0	0	0	0
Cycle 3 on 04/24/15	0	0	0	0	0	0	0
Weighted 3-Cycles*	$\frac{0}{2} + \frac{0}{3} + \frac{0}{6} = 0$				 Congratulations on Achieving 5 Stars		

Count of Deficiencies by Scope/Severity Code and Cycle

This figure shows for each of the last three survey cycles (1, 2, and 3), the number of deficiencies you received at each scope and severity level.

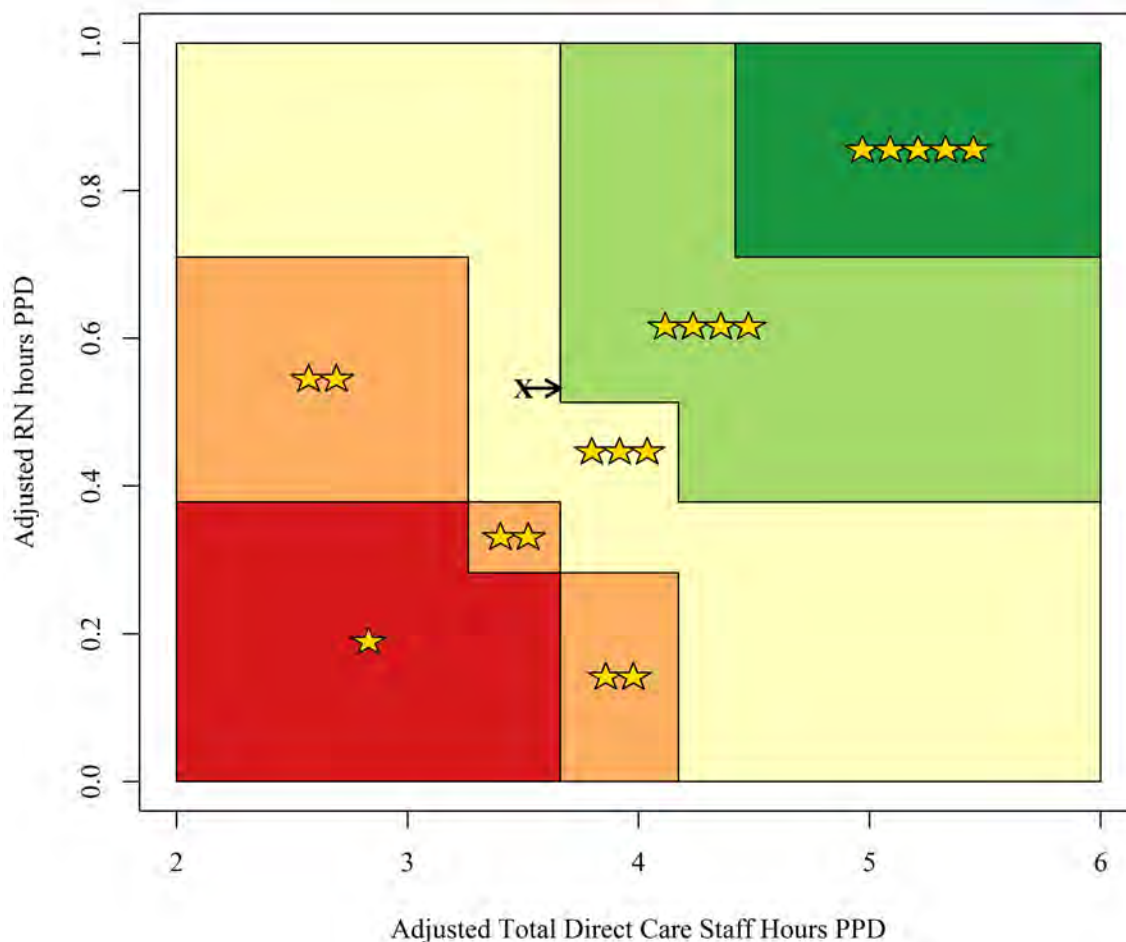
		Scope		
		Isolated	Pattern	Widespread
Severity	<i>Immediate jeopardy</i>	J 1 - 2 - 3 -	K 1 - 2 - 3 -	L 1 - 2 - 3 -
	<i>Actual harm that is not immediate jeopardy</i>	G 1 - 2 - 3 -	H 1 - 2 - 3 -	I 1 - 2 - 3 -
	<i>No actual harm with potential for more than minimal harm that is not immediate jeopardy</i>	D 1 - 2 - 3 -	E 1 - 2 - 3 -	F 1 - 2 - 3 -
	<i>No actual harm with potential for minimal harm</i>	A 1 - 2 - 3 -	B 1 - 2 - 3 -	C 1 - 2 - 3 -

Congratulations on Being Deficiency Free!

Your Staffing Rating Breakdown

To gain one star on your staffing rating (moving from 3-stars to 4-stars), you can increase your *adjusted* DCS hours PPD from 3.50 to 3.66 PPD; this is equivalent to increasing your *actual* DCS hours PPD by 0.17 (10.1 minutes), from 3.71 to 3.88 PPD.

The Figure below shows your current Five Star staffing rating based on your adjusted hours PPD, and the black arrow leading from the “X” indicates your current case-mix adjusted staffing levels and where you need to go to increase your staffing rating. The color graduation from red to green is increasing staffing ratings from 1 to 5.



The boundaries for hours PPD between the ratings are as follows:

Staff type	1 Star	2 Stars	3 Stars	4 Stars	5 Stars
RN	< 0.283	0.283-0.378	0.379-0.512	0.513-0.709	≥ 0.710
Total	< 3.262	3.262-3.660	3.661-4.172	4.173-4.417	≥ 4.418

Your Quality Rating Breakdown

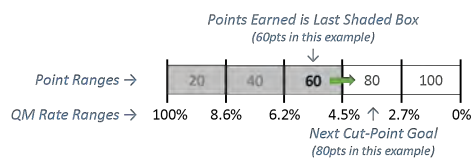
Your current Quality Measure (QM) rating of 3 Star can improve to 4 by gaining 10 total points. The table below shows the number of points you have earned on each QM and a goal rate to increase your points on each QM.

	Current Performance					Next Cut-Point Goal	
	Time Period	Rate	Points	Point Ranges	Rate	Points	
SS ED Visits	2015q3-2016q2	22.4%	20		15.5%	40	
SS Rehospitalizations	2015q3-2016q2	28.8%	20		25.7%	40	
SS Antipsychotics	2016q1-2016q4	4.3%	20		3.5%	40	
SS Pain	2016q1-2016q4	27.1%	20		26.0%	40	
LS Pain	2016q1-2016q4	12.2%	40		8.3%	60	
LS Mobility Decline	2016q1-2016q4	22.7%	40		19.3%	60	
LS Injurious Falls	2016q1-2016q4	4.4%	40		3.5%	60	
LS Antipsychotics	2016q1-2016q4	13.9%	60		12.7%	80	
LS UTIs	2016q1-2016q4	3.4%	80		1.9%	100	
LS Pressure Ulcers	2016q1-2016q4	3.9%	80		2.7%	100	
LS ADL Decline	2016q1-2016q4	11.7%	80		10.0%	100	
LS Catheter	2016q1-2016q4	1.1%	80		1.1%	100	
SS Improved Function	2016q1-2016q4	79.1%	80		81.7%	100	
LS Restraints	2016q1-2016q4	0.0%	100		0.0%	100	
SS Pressure Ulcers	2016q1-2016q4	0.0%	100		0.0%	100	
SS Community Discharge	2015q3-2016q2	73.6%	100		100.0%	100	
Five-Star QM Rating	May 2017	3 Stars	960		4 Stars	970	

*N/R= Not Reported, QM points imputed if possible.

Source: May 2017 Release of Nursing Home Compare

Figure Legend:



Long-Term/ Dementia Care Short-Stay/ Post-Acute Organizational Success	Antipsychotics Current Rate 12.2% % Change (Goal -30%) -9.2% -	Hospitalizations (LS) Current Rate (Goal 10%) 10.0% - % Change (Goal -15%) -34.3%	Summary of Performance 3 of 8 Targets Achieved
	Hospital Readmissions Current Rate (Goal 10%) 18.5% - % Change (Goal -30%) -33.3%	Discharge to Community Current Rate (Goal 70%) 66.0% - % Change (Goal +10%) 19.3%	Functional Improvement Current Rate (Goal 75%) 70.6% - % Change (Goal +10%) -16.0% -
	Staff Stability Current Rate (Goal 40%) Not Uploaded - % Change (Goal -15%) Not Uploaded -	Customer Satisfaction Goal: Upload CoreQ Data to LTC Trend Tracker Not Uploaded -	Unintended Health Care Outcomes Coming Soon

Icon Key



* - Must meet at least one goal to achieve target. TBD - To Be Determined

The AHCA/NCAL Quality Initiative

The [2015-2018 initiative](#) challenges members to meet measurable targets in eight areas with a focus on three key priorities: improvements in organizational success, short-stay/post-acute care, and long-term/dementia care.

These areas are aligned with CMS's Quality Assurance /Performance Improvement (QAPI) program and federal mandates, such as Five-Star and the IMPACT Act.

Click on the measure names on the left for target-specific resources.

AHCA/NCAL Resources to Know

Emergency Preparedness

- [Final Rule Webinar Series](#)- Are you on track to be in compliance by November 2017?

Infection Preventionist Specialized Training (IPCO)

- This [online, self-study program](#) on ahcancaLED with 23 hours of learning helps members with the recently expanded infection prevention and control training requirements

LTC Trend Tracker

- [Resource Center](#) - home of videos and guides on how to access and run reports

Data Sources

Survey, Staffing, and Five-Star Quality data (pages 1-4) from May 24, 2017 release of Nursing Home Compare. Quality Initiative data (page 5) from LTC Trend Tracker as of June 20, 2017.

If you have any questions, please email help@LTCtrendTracker.com



Early bird registration ends July 21, so [register today](#) and save!